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IS VACCINATION DESIRABLE?

Verbatim Report of a Debate on the 17th March, 1885,

BETWEEN

H. BRANTHWAITE, F.R.C.S., EDIN.,

Medical Officer of Health for Willesden,

AND

ALFRED MILNES, M.A. (LOND.), F.S.S.

"It is not enough that a man should hear the arguments of adversaries from his own teachers, presented as they state them, and accompanied by what they offer as refutations. That is not the way to do justice to the arguments, or bring them into real contact with his own mind. He must be able to hear them from persons who actually believe them; who defend them in earnest and do their very utmost for them."—J. S. MILL.

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THE VACCINATION LAWS.

INQUIRY ON THE CONTINENT.

Dr. Thorne Thorne, principal medical officer of the Local Government Board, returned to London yesterday, after a fortnight's visit to Paris and Brussels to study the means of vaccination at both capitals. The inquiry was put on foot by the Local Government Board in view of a Government measure, which it is proposed to introduce next Session, to make vaccination totally free, with a completely separate department in London. Dr. Thorne Thorne first visited Paris, and was given every facility for inquiry by the professors of the Institut Vaccinal, affiliated to the municipality of Paris, and the Académie de Médecine, where vaccine lymph is distributed gratuitously, after admixture with glycerine, throughout the whole of France, at the expense of the State. A visit was afterwards made to Brussels, where the École de Médecine Vétérinaire—State Department for Belgium—and Dr. Janssen's vaccination department, under the municipality of Brussels, were visited. After Christmas Germany, which has made a special study of vaccination, will be visited.

Daily Chronicle

19. 12. 96

PUBLIC DEBATE

ON

VACCINATION.

A PUBLIC Debate on Vaccination took place at the High School, Willesden, on Tuesday evening, March 17. The question for debate was put thus:—"Is Vaccination desirable from the standpoint of the Public Health?" Mr. H. BRANTHWAITE, F.R.C.S., took the affirmative, and his opposer was Mr. A. MILNES, M.A., F.S.S.

Mr. F. K. MUNTON occupied the chair, and introduced the debaters, saying it was not the duty of the chairman to express any opinion on the subject for debate, but merely to introduce the debaters, and let them speak for themselves. But, he added, that with the object of finding out a little of the merits of the subject for debate he had searched the House of Commons records, and found that Sir Lyon Playfair had argued that vaccination was altogether desirable, and, on the other hand, Mr. P. A. Taylor considered it an utterly foolish superstition. After reading these two conflicting accounts he did not know what to say of the matter, and he therefore left the question in the hands of the two strong men who were to solve it that night.

Mr. BRANTHWAITE, in moving that "Vaccination is desirable from the standpoint of the public health," said—Public health is a subject of vital importance, and nothing bearing upon the question can be a matter of indifference. Many victories have been achieved in the field of sanitation, but I venture to assert, and trust to be able to prove the assertion, that the greatest sanitary triumph of the eighteenth century was the discovery of vaccination as a prophylactic against one of the most loathsome diseases that afflicts humanity. A disease that can and will be finally eradicated is as much the belief in the minds of medical men, and of the educated public in the present day, as it was in the stout heart of Edward Jenner, a man who, in spite of his detractors, will ever be remembered as one of the greatest benefactors of mankind.

It is of this disease Lord Macaulay speaks when he says "That disease, over which science has since achieved a succession of glorious and beneficent victories, was then, 1694, the most terrible of all the ministers of death. The havoc of plague had been far more rapid, but the plague had visited our shores only once or twice within living memory, and smallpox was always present, filling the churchyards, tormenting with constant fears all those whom it had not yet stricken, leaving on those whose lives it spared the hideous traces of its power, turning the babe into a changeling at which the mother shuddered, and making the eyes and cheeks of betrothed maiden objects of horror to the lover." From these quotations and others we are enabled to form an opinion as to the state of the inhabitants of this country during the period I have named. The effect of all this is seen on reference to the Bills of Mortality for the City of London, published in 1801 by Dr. Heberden, showing that, from 1701 to 1800, one-fifth of the whole mortality registered 85 out of every thousand deaths arose from smallpox. During the last 50 years of the eighteenth century they had risen to 97 in every thousand. So at that period, out of the deaths at all ages and from all causes, smallpox was responsible for one in every ten. To remember, was only the measure of its fatality. We are enabled to conjecture the terrible amount of misery entailed upon those who recovered. We catch a glimpse of one development of that misery in the fact, as stated in the *Medical Times and Gazette* of January 14, 1871, in an article upon the subject of reference to Liverpool, that two out of every three persons applying for relief to the Hospital for the Indigent Blind owed their loss of sight to smallpox.*

Those are the simple records of the effects of smallpox upon the public health in England, though during the period I have named all that could be done was done towards lessening the evil.† If such obtained in England, we are not surprised to find that in less civilised lands the evils were magnified a thousandfold. The great American traveller, Catlin, tells us that the large and powerful tribe of Mandans, whose amiable disposition and manly virtues he describes, were within a short period entirely swept from the face of the earth by smallpox, and not a single representative left.

As we are in this debate to deal with vaccination, I pass over the period of inoculation or variolation, merely remarking that it was in this practice the first ray of hope flashed across what might be almost called the blackness of despair. Smallpox

* Appendix, Note A.

† Appendix, Note B.

pox proved much less fatal when artificially produced than when taken by infection. This is accounted for inasmuch as the time for variolation was chosen when the patient to be operated on was in good health, and consequently better able to withstand the constitutional disturbance produced; whereas when the disease was accidentally acquired, the vital powers might not be in such a favourable condition to fight with the disease. The induced disease was mild in its nature, for whilst the deaths from natural smallpox were as one in six,* those who had the disease from inoculation recovered in the proportion of 399 out of 400. The evil from this practice, however, arose from the fact that every case was a centre of contagion spreading the disease to others. For this reason alone I should object to such a practice, and for that reason I object to the action of the anti-vaccinationists of the present day. My views are exactly expressed in the *Saturday Review* of January 26th, 1871, in the following extract:—"The Englishman is, as we all know, an eccentric animal, but perhaps he has seldom developed a more singular propensity than his marked affection for contagious diseases. He resents with an almost pathetic stupidity any interference with his right to catch every variety of deadly complaint." Now, whilst I am perfectly willing to allow the right of any man to indulge in smallpox or any other disease of an infectious nature, I do most emphatically protest against his right to render me liable to suffer as a consequence of his indulging in something that I do not regard from the same standpoint. Now we come to the period of Jenner's great work on vaccination. For the purpose of this debate it is unnecessary for me to follow him through the various stages of his discovery. Anti-vaccinators try to make a point out of the various difficulties and contradictions which Jenner met with in the perfection of his discovery. Such arguments as can be brought against Jenner during the time occupied in his researches, may with equal force be used against any other man who has by patient industry and indomitable perseverance perfected inventions and improvements conferring lasting benefits upon the world at large. During the early period of vaccination, it met with a strenuous and unscrupulous opposition. Religious philanthropists charged upon it that it was opposing the behests of God himself, whilst others declared that the operation was capable of transforming the human face into the likeness of an ox; and a certain Dr. Rowley actually showed the likeness of a boy who by vaccination had been changed from a human

* Appendix, Note C.

being into a cow. Dr. Woodville, of the Smallpox Hospital, was amongst the first to put the principles taught by Jenner to the test. His experiments were commenced in 1799, both with inoculation and vaccination, but the superiority of Jenner's plan was so soon demonstrated that in 1808 it was used exclusively for out-patients, and in 1823 the practice of inoculation was entirely abandoned. Here, allow me to say, that Jenner's views upon the usefulness of vaccination have been seriously misrepresented; whatever may have been his earlier hopes and beliefs while the investigations were going on, there is no misunderstanding his utterances when once the discovery was complete. The fact is, that too much has been expected of vaccination. It is not an absolute preventive of smallpox, and its power is, in my opinion, more limited by time than has hitherto been thought to be the case. Jenner's own words are—"Duly and efficiently performed it will protect the constitution from subsequent attacks of smallpox, as much as the disease itself will. I never expected it to do more, and it will not, I believe, do less." I lay stress upon the words *duly and efficiently*, because I believe a good deal of the failures in the protective value of vaccination have arisen from the fact that the operation has not been efficiently performed, sufficient care has not been exercised to secure perfect vesicles; and many thousands of children have been certified as successfully vaccinated, on whom the operation ought to have been again performed. But, from some cause or other, perhaps a yielding on the part of the medical man to the sentimental nonsense of some good mothers who object to their children being hurt, medical men have allowed to pass what they know full well is a vaccination wanting in the complete protective value it ought to have conveyed, Dr. Jenner maintained in the most strenuous manner that, to render the cowpox efficient, it was absolutely necessary to attend most carefully to the character of the pustule, and the time and quality of the lymph taken from it; for it must be understood that Jenner considered the smallpox and cowpox as identical maladies, and by no means dissimilar in their nature. Dr. Baron, in the life of Jenner, points this out in the following passage:—"It was clearly ascertained that there were deviations from the usual characters of smallpox, which were quite as common, and infinitely more disastrous than those which took place in vaccination." Those deviations referred to apparently different states of the constitution. In the one, susceptibility, smallpox was taken in by previous infection; but, on the other hand, some constitutions seemed to be unsusceptible of smallpox altogether. It was found that similar occurrences took place in the practice

of vaccination, but as the security which the latter afforded was never more likely to be interfered with by slight causes than the former, it became absolutely necessary that great care should be shown in watching the character of the pustules. Dr. Jenner had, in the beginning, felt the propriety of this watchfulness, and had distinctly announced that it was possible to propagate an infection by inoculation, conveying different degrees of security according as the affection approached to, or receded from, the full and perfect standard. He also clearly stated that the character of the vaccine pustules might be so modified as to deprive it of its efficacy.

Now, in spite of the efforts of anti-vaccinators, the practice has become more and more universal. This is proved by the proportion of cases unaccounted for in the returns of the vaccination officers. These returns show the difference between the registered births, and the returns of successful vaccination, after deducting those which died before the period for vaccination, and which were postponed for medical reasons. In the metropolis this proportion unaccounted for in 1872 was 8·8 per cent., in 1880 it was only 5·7 per cent., and in 1881 5·3 per cent. In the rest of England it was 4·5 per cent. in 1872, and 3·5 per cent. in 1881. This, at all events, shows that anti-vaccinators have not made much progress with the public, and, if they are to do so, they will have to make a new departure.

So much for vaccination. Is it, then, desirable that the operation should be universally performed, having regard to its effects upon the public health? I have already stated that during the second half of the eighteenth century the deaths in London from smallpox reached nearly 1 in 10. Heberden gives the exact figures as 97·2 per thousand. During the first half of the present century the deaths from smallpox in London fell from 97·2 to 35·5 per thousand. The ratio of decrease was as follows:—From 1801 to 1810, 64 per thousand; from 1841 to 1850, 16 per thousand; from 1851 to 1860, 11 per thousand. You see from these figures that the great falling off in deaths is co-incident with the spread of vaccination, seeing that it was in 1840 that gratuitous vaccination was provided. If we take the whole of England and Wales, we find the same results equally borne out.

I now ask your careful attention to the following statistics; but, before doing so, I would ask my friend, Mr. Milnes, to forgive me on this occasion only for even mentioning the word compulsion, but the periods I am taking are marked by sharp lines that I cannot alter. From 1847 to 1853, when vaccination was optional, the death-rate from smallpox per million

was—under five years old, 1617; and at all other ages, 305 per million. During the period 1854 to 1871, when vaccination was obligatory, but not efficiently carried out, the rate per million under five years old was only 817, and at all other ages 223 per million. During the period 1872 to 1880, when vaccination was obligatory and efficiently carried out, the rate per million under five years of age was further reduced to 323, and at all other ages 156 per million; or, to place the matter still more clearly, every successive step in vaccination has been to reduce the mortality from smallpox. Voluntary efforts reduced the mortality of last century from 3000 to 600 per million. Gratuitous vaccination by the State reduced it to 302, and obligation inefficiently carried out to 223, and the same efficiently carried out reduced it still farther to 156 per million. The beneficial effect of vaccination in one branch of our public service is so marked, that I think I may deduce from it an argument in support of my proposition. By the kindness of the Chief Surgeon of the Metropolitan Police, I have had an opportunity of examining the returns of deaths in the force for the past eighteen years. During that period the average strength has been 10,500 men. Of the liability of policemen to contract infectious disease there can be no doubt in the mind of any one with the most superficial knowledge of the duties they have to perform. Ever since the establishment of the force re-vaccination on entering the service has been carried out. From 1867 to 1884 there occurred amongst these 10,500 men only 205 cases of smallpox, or a little over an average of 11 cases annually, and during that 18 years, what is more satisfactory, only six deaths occurred. In January of 1871, eight cases were reported in the force, but as the epidemic was becoming formidable, and attacked very many who had been re-vaccinated, the attention of the Commissioners was called to it, and they insisted on having men who had been over three years in the force again re-vaccinated, and the order for re-vaccination was extended, on February 21st, to all the members of the force. The divisional surgeons carried this order into effect as speedily as possible. The beneficial result was immediately apparent: 18 cases occurred in February, one fatal in a recruit who had been unsuccessfully vaccinated three weeks previously. After the completion of three weeks after vaccination, the progress of the epidemic was checked at once. The total cases in the year were 26 in the first two months before the operation of re-vaccination, and 16 in the ten months after re-vaccination was complete, or 42 altogether, but of this number two died and both those cases happened to men who had been recently re-vaccinated unsuccessfully.

That vaccination is desirable is proved by the fact that among persons attacked by smallpox, the mortality is greater in the unvaccinated than in the vaccinated. To substantiate this I will take the statistics of the Metropolitan Asylum Board Hospital. Out of 13,575 cases in vaccinated persons 7 per cent. died; out of 2,130 doubtfully vaccinated 35 per cent. died, and out of 3,973 unvaccinated 40 per cent. died.*

This increase referred to deaths at all ages. Now, take the figures of children under 10 years old. Out of 1,291 cases vaccinated the deaths were 56, or $4\frac{1}{2}$ per cent.; out of 359 doubtfully vaccinated 102, or 28 per cent. died; out of 1,512 unvaccinated 745, or 49 per cent. died. Again, I say that when vaccinated persons are affected with smallpox the severity of the disease is inversely proportional to the quality of the vaccination. Careful observation proves that the severity of the attack of smallpox varies inversely with the marks of vaccination. Again I take the classification of cases at the Metropolitan Asylum Board's Hospitals, and, in order not to weary you with statistics you cannot possibly remember, I will only give you the extremes. Out of 2,004 cases with only one vaccine mark, and that imperfect, there died 341, or 16·7 per cent. Out of 826 cases bearing 4 marks of perfect vaccination 23 died, or 2·7 per cent. The experience of the London Smallpox Hospitals is even more favourable to vaccination than that.

Again, that vaccination is desirable is farther evidenced by protection, secured by successful re-vaccination in the adult following the perfect performance of the operation in infancy. The evidence on this point is conclusive if we look into the statistics of cases occurring amongst those engaged as nurses and attendants in smallpox hospitals. Mr. Marson gives, as the result of 35 years' experience in the London Smallpox Hospitals, that he never had a nurse or servant contract smallpox, having been re-vaccinated; and in the hospitals of the Asylums Board during the past 12 years smallpox has been almost unknown amongst the re-vaccinated staff. If it is tried to explain this by saying that the majority of those had previously suffered from smallpox, such is not the case, for we are told by Dr. Sweeting that only a very small proportion of them were thus protected. On this point he says, at Fulham, that out of a staff of 295 only 42 had previously had smallpox. At Stockwell, 16 out of 340 had been patients at Homerton; at Deptford, 20 out of 265; and on the Atlas, 3 out of 166. Then it is sought to account for this immunity on the ground

* Appendix, Note C.

of toleranee, but this is equally groundless. We do not find toleranee proteet nurses in their attendance on fever eases.* It is worthy of note that it was amongst the unsuccessfully re-vaccinated that the disease appeared. In the three great fever hospitals of London during the ten years, 1871 to 1880, 2177 eases of typhus fever were treated, and 78 members of the staff took the disease, and 21 died. At Homerton Fever Hospital during the attacks of 1880, 1882, and 1883, when typhus was prevalent, 14 members of the staff suffered from the disease. Why, then, elaim toleranee in the one ease, and not in the other? We find the same evidence in the returns of mortality in our army and navy; and by comparing the comparative immunity of the German with that of the French army during the Franco-Prussian war, the total deaths from smallpox in the German army, where re-vaccination was rigorously enforced, was 263; whilst the French army, where vaccination was neglected,† had a loss of 23,469 men. This could not be because they were Germans, seeing that smallpox was epidemic in Berlin during 1871, and was nearly as fatal to the civil population as it was in Paris during the siege. Now, if you go to India—I quote from a letter in the *Times* from a sanitary commissioner of the Punjaub—a country as yet practically unprotected by vaccination. He says—"In the Punjaub, with a population of 8 millions, the deaths from smallpox are never less than 20,000 a year; in 1869 they numbered 53,195. The amount of physical disfigurement caused by smallpox is enormous. Any person walking through the streets of a Punjaub city is struck by the immense number of persons blind in one or both eyes, caused in 99 eases out of 100 by smallpox." But here comes the important part. Europeans, who as a rule are tolerably protected by vaccination, suffer very little, though they live in the midst of a never-ending epidemic. In the Punjaub few persons reach adult life without having had an attack of smallpox.

Now, I think I have addueed sufficient evidence for the present to support my proposition, "That vaccination is desirable from the standpoint of the public health;" and I say with Alison—"He who disputes it is equally unreasonable as he who opposes in like manner any proposition in Euclid." My friend will now have an opportunity of putting in his shadows upon the lights in which I have presented vaccination to you. I conclude in the words of Sir Thomas Watson—"It is right, I say, that this matter should be steadily contemplated in all its lights and with all its shadows, in order

* Appendix, Note D.

† Appendix, Note E.

that the unspeakable blessing conferred upon mankind by the researches of Dr. Jenner may be fairly set forth, and adequately appreciated." A blessing, I would add, in which the opponents and detractors of vaccination participate—more's the pity.

MR. MILNES: Mr. Chairman, Ladies and Gentlemen,—Before I do my best to reply to the able essay we have just heard read to us, I would wish to make one statement that shall make matters clear as to the position I occupy when I come forward to-night to take my place on this platform. I am to-night discussing the value of vaccination itself, and I am doing so exclusively. I am to make no allusions beyond the one I am now going to make, to the fact of there being in this country a law on the subject. There is in this country a law which professes, and which falsely professes, to make vaccination compulsory on all alike. It makes it compulsory on the poor alone; it leaves it to the rich and the well-to-do to absolutely despise and defy the law, as I do. With this law I hold no terms. I have myself been fined under the law, but, when I had paid the fine, no child of mine had a meal the less. But there are people who deserve at the hands of this law neither more nor less than I do, but who have been absolutely ground down into the dust by this law, and such a law, I say, is a disgrace to our civilisation. Consequently, sir, if in the very improbable result of my antagonist persuading me to look on vaccination as he does himself, I shall still hold it my duty to oppose this law in the future as I have opposed it in the past, and in that task I will not stint nor stay as long as it lies in my power to do any political work for the poor of this land at all. Having made that statement, that I be not misunderstood, I turn to the consideration for a few moments of the arguments we have just listened to. In the first place, I should like to point out that Lord Macaulay was quoted as to the severity of the disease in the 18th century, but Lord Macaulay was not quoted as to the state in which the people then lived. Lord Macaulay says, "The prisons were hells upon earth—seminaries of every crime and of every disease; at the Assizes the lean and yellow culprits brought with them from their cells to the dock an atmosphere of stench and pestilence which sometimes avenged them signally on bench, bar, and jury." It is utterly unfair to quote Lord Macaulay's account of the severity of the epidemics unless you also quote Lord Macaulay's words, in which he lays down the cause of that effect. We were sent to Catlin about the North American Indians, but we did not have a quotation of the remarkable

passage in Catlin, in which he points out that the recently vaccinated North American Indians were exactly the ones who suffered most, such cases being almost invariably fatal, and in which he distinctly says that those in whom the vaccination was of earlier date managed somehow to escape altogether. That, remember, is the remark of a believer in vaccination.

Then, sir, in order to take the biggest of these fairy tales first, we had the French and German armies quoted to us. Wherever I go, on every platform where I have to meet with opposition, I have to meet with these 23,469 of the French army and the 263 Germans. Now it seems almost too astonishing that there is absolutely not a shadow of a shade of foundation for that statement to be found in any official documents in Europe. Yet such is the fact. Dr. Carpenter himself, relying upon whose information Sir Lyon Playfair made the statement in the House of Commons, when he was challenged as to what was his authority for it, was unable to find any authority whatever. He set Lord Granville to endeavour to find the authority. Lord Granville took six weeks in trying to find it, and here I have a letter to the *Daily News* of August 8th, 1883, in which Dr. Carpenter himself withdraws that statement, and admits that there is no foundation for it in any official documents whatever. During the months of the war there was such disorder both in France and in Germany that there was no record of any sort or kind kept of the small-pox deaths, and whilst the Army Departments on both sides have been cross-examined in the endeavour to find out some origin for this simple canard, this wild fable, they, both of them, declare, and I have the official answers with me, that they have no such figures of any sort or kind, so that this enormous argument about the French and German armies is absolutely non-existent. In France from Brest to Toulon, in Germany from Frankfort to Vienna, there is not so much record of these supposed facts as would cover an old postage stamp.

Then we were called upon to admire the patient industry of Jenner. My opponent obtained his biography of Jenner from Mr. Simon's vivid imagination. Unfortunately the facts with regard to Jenner do not point that way. This is the chronology of Jenner's long and patient investigation. The first vaccination in England was performed upon James Phipps on 14th May, 1796. There was no possibility of repeating that experiment at all until March 16th, 1798, when John Baker was vaccinated, and in June of that same year, only three months afterwards, was published Jenner's "Inquiry," in which we are asked to believe that Jenner said he never expected vaccination to do more than smallpox did. But in

that year 1798, what he says is this: "What renders the cowpox virus so extremely singular is that the person who has been thus affected is for ever after secure from infection of the smallpox, neither the exposure to the variolus effluvia nor the insertion of the matter into the skin producing this distemper." He laid that doctrine down, and for that doctrine he pocketed £30,000 sterling of good British money. That was the doctrine that he first published with regard to vaccination, and that is the doctrine which is now proved absolutely false. False, however, as it is proved, it is nevertheless a doctrine that is still laid down when people want to persuade us to be very much vaccinated. "On the conclusion of this artificial disorder," says Mr. Simon, "neither renewed vaccination nor inoculation with smallpox, nor the closest contact nor cohabitation with smallpox patients, will cause him to betray any remnant of susceptibility to infection." That is Mr. Simon's statement. The fact of it is that protection is served out to us by the doctors from a variety of bottles. If they find a man who will swallow a big dose they give him "absolute protection." When a lady comes to inquire into it they give her the "preservation of the complexion." When an inquiring person comes they say, "We never expected it to do more than a previous attack of smallpox would have done," and in that way they have a recipe for every kind of intellectual constitution. Then, turning to another matter, we are asked to swallow a good deal I think about the mortality of the unvaccinated. That is part and parcel of the argument which tries to show that smallpox was always such a dreadful thing as they endeavour to make it out to have been in the 18th century. In the 18th century smallpox was a terrible thing, because by the 18th century the infallible doctors had got hold of it, and they were advocating an infallible preventive of it, viz., inoculation. The result was they were spreading the disease all over the country into places where it had never been before. That was what made the 18th century smallpox so terrible. But in spite of the 18th century smallpox being really terrible it was not so terrible as they attempt to make out. Here, for instance, I have an extract from Baron von Swieten, who was head physician to Maria Theresa. Speaking of schools he had inspected in Vienna in 1745, he says, "To sum up, we find that the whole number of smallpox patients in those places was 355, of whom 7 died. The proportion of deaths to recovery was 1 in 50; but if from those 7 deaths we take off three sickly persons whose deaths could not be ascribed to smallpox alone, the proportion of deaths to recoveries, will be 1 in 89 or thereabouts." That is a very

different tale to the 31 per cent., 40 per cent., and the 49 per cent. to which we have been treated to-night, and the 65 per cent. to which in other places we have been asked to give our assent. But there is something more serious than that. We have in Rees's Encyclopædia, and in the works of Jurin and Duvillard, an investigation of 24,996 cases of smallpox before vaccination was invented. Call it, therefore, 25,000 cases, and the mortality per cent. is 18. I wish I had the opportunity of writing up a good big 18 per cent. somewhere in this room, and asking you all to keep your mind and your eye fixed on that 18 per cent. When you are asked to believe that the unvaccinated now, for want of vaccination, die at the rate of 49 per cent. please do a little subtraction sum: take 18 from 49 and ask my opponent who it is that kills the other 31.

Then we have been treated to a little statement about India. Now, I will give you an extract from an Indian blue-book. In a recent blue-book it is stated, "The vaccination returns in India show that the number of vaccinations does not bear any ratio to the smallpox deaths. Smallpox in India is related to season and also to epidemic prevalence. It is not a disease, therefore, that can be controlled by vaccination in the sense that vaccination is a specific against it. As an endemic and epidemic disease it must be dealt with" (it is a wise man I venture to think who wrote these words) "it must be dealt with by sanitary measures, and if those are neglected smallpox is certain to increase during epidemic times. Vaccination has no power apparently over epidemic smallpox. It would scarcely answer, in the face of these facts, to go on vaccinating the people to protect them from smallpox, while leaving them surrounded by such disease causes as the reports would show to exist in all the villages affected." That is from the "Report on Sanitary Measures in India, 1879-80." Vol. 13, 1881.

So much, then, for India; but I think it is almost time to turn from the consideration of the remarks that we listened to a little while ago, and to state the case for myself as against vaccination. I may return to some one or two of those points afterwards, if those points are any further pressed, but I want to ask in the first place whether vaccination has generally improved the state of things. Now, in 1853 vaccination was first made compulsory—obligatory, at least—and let me here simply state that I protest altogether against the division that we have had of these periods. Vaccination was made really compulsory by the Act of 1867. The Act of 1871 was an explanatory Act, and if you take these periods of compulsion, as they properly are, you have them in this way. Before

compulsion, from 1847 to 1853; obligatory vaccination not strictly enforced, 1854 to 1867; strictly enforced vaccination, from 1868 to the present time. And, now, see what a different complexion the figures wear if you just shift the great 1871-72 epidemic into its proper place, namely, into the third period, that of rigid compulsion. Before any compulsion from 1847 to 1853, the mean annual smallpox death-rate per million living was 305; between 1854 and 1870 you have the annual death-rate, 171; between 1871 and 1880 the mean annual death-rate was 235. It is all very well to take the great epidemic of 1871, which is the stumbling-block of those who believe in vaccination, and dilute the mortality of it in the 14 or 15 preceding years; that is Dr. Ballard's way of doing it, and Dr. Ballard has gone a little further in the same direction, and says what is doubtless true, that he could make the whole case in favour of vaccination plain, if he were permitted to leave out the epidemic years. That is precisely like a man who says he would be perfectly solvent if it was not for his confounded debts.

Now, we have had three epidemics since vaccination first began to be enforced upon us. In the first epidemic, 1857-59, the deaths from smallpox were 14,000 and odd; I will read to the nearest thousand. In the second epidemic, 1863-65, there were 20,000; in the third epidemic, 1870-72, there were nearly 45,000. This is the way in which vaccination, when it is efficiently and properly forced upon us, stamps out smallpox. The increase of population between the first and second epidemic was only 7 per cent., while the increase in the magnitude of the epidemic was 40 per cent. The increase of population between the second and third epidemic was 10 per cent., and the increase in the magnitude of the epidemic during the same period was 123 per cent. How you are going to make out from this that vaccination is a protection against smallpox, I am absolutely at a loss to discover. But then, if they say that it is not fair to take the epidemic years alone, I will avoid taking those years alone, and take simple periods. Let us take the period of 10 years. In the period where we get the first law passed, from 1851 to 1860, you have 42,000 deaths from smallpox; in the second decade, 1861 to 1870, you have 34,700 deaths; and in the last decade, 1871 to 1880, you have 57,422 deaths. It seems to me that this vaccination, when it was enforced upon us by the Act of 1867, was forthwith succeeded by a large increase of smallpox, and how this comes to pass I will investigate a little later on. Suffice it for me to quote one more extract, and that is an extract from an authority that all sanitarians and health officers must, I am sure, respect—the Registrar-General him-

self. He says in his report for the decennium ending 1880—"It will be found that the saving of life was almost entirely due to the diminished mortality from causes whose destructive activity is especially amenable to sanitary interference, namely, the so-called zymotic diseases. . . . The death-rate from fever fell nearly 50 per cent. . . . That of scarlatina and diphtheria fell 33 per cent. . . . One disease alone in this class showed exceptionally a rise, and no inconsiderable one. This was smallpox, which, owing to two great outbreaks of 1871-72 and 1877-78, gave a death-rate nearly 50 per cent. above the previous average." That is to say, in the case of the one disease against which we are using special prophylactic measures—special measures which are complete, because they are made complete by law—these special prophylactic measures are followed by an increase of that disease, and of that disease only, and therefore it is that the doctors tell us that to be unvaccinated is to lie beyond the latitude not only of salvation, but of Euclid. Then the nurses have been quoted, and Mr. Marson's statement about those nurses never taking smallpox. Now the real facts are, that at Stockwell there have been 3, at Fulham 7, at Deptford 1, at Halifax 1, in Sheffield 2, at Lewes 2, while in the island of Trinidad, so convinced was the medical officer, Dr. Bakewell, there, of the value of vaccination, that he vaccinated himself six times over, and lived to give evidence before this 1871 committee of having had smallpox after all.

Then we come to the consideration of the mortality of the unvaccinated. They say, Well, we admit that vaccination cannot protect you altogether, but look at the different mortalities. Well, let us look at the different mortalities; let us look at them when we can get them thoroughly kept. For instance, let us go to the returns kept by the burgomasters of Cologne, in the great epidemic of 1871. There you have a population of 117,000 vaccinated, and 8,000 unvaccinated; of cases you had 2,351 vaccinated, that is, 2 per cent. of the vaccinated population; of unvaccinated you had 49, or only $\frac{1}{2}$ per cent. of the unvaccinated population. The percentage of mortality of children to cases is thus—the vaccinated children, meaning by children infants under two years of age, died at 80 per cent., the unvaccinated at 66 per cent. of cases. Taking, again, the chronological order of the cases, the first 173 that occurred in Cologne were all of them either vaccinated or re-vaccinated; that is to say, there were 173 vaccinated and re-vaccinated patients suffering from every variety of smallpox before these "centres of contagion," these "fire-brands amongst gunpowder," these "open cesspools," according to the elegant language to

which our medical opponents are constantly treating us, could be persuaded to put in one single appearance in the smallpox returns. Again, take the roof unit—there is no more powerful instrument in vital statistics than the roof unit, that is, taking the house from garret to cellar as a unit—you find that never once did smallpox, throughout the epidemic, enter a house except when it was brought into that house by either a vaccinated or re-vaccinated person; that is to say, every single case in which an unvaccinated person obtained the disease at all, he obtained it from a centre of contagion, which centre of contagion had been vaccinated. That I take from a perfectly sound authority, from Dr. Prosper de Pictra Santa, *Redacteur en chef du "Journal d'Hygiène,"* the chief French medical paper.

Now, I should like just to put before the meeting one word or two on the common sense aspects of this question. We are told that there is a great consensus of opinion on the part of the medical profession about vaccination, and so there is. But what does it mean? It only means that they want to keep all criticism to themselves. A denounces B as being either useless or dangerous, or both, and B returns the compliment; while A and B agree about nothing, except in denouncing me as an unpatriotic, outside-of-Euclid sort of a scoundrel, because I agree with both of them. Now, take the great divisions on lymph. I wonder how many people in this room know how many lymphs there are—absolutely separate and independent stocks of lymph! You are generally told that there is calf lymph and humanised lymph; and, of course, calf lymph is the lymph which most vaccinators pronounce to be safe. But no less an authority than Dr. Seaton himself denounces calf lymph as being unsafe—more unsafe than humanised lymph. Seaton himself, and Ceeley agrees with him, says that so far from producing less irritation it is likely to produce far more. Then we have another variety of lymph, the smallpox itself, that is the lymph of Badcock. On that I should just like to quote the opinion of no less a vaccinator than Dr. Charles Cameron, M.P., who says—"Now what I want to know is, what has become of this lymph? My great reason for asking the question is that more recent and searching experiment has demonstrated that it is not vaccine lymph at all, but smallpox lymph, capable of being inoculated apparently with greater safety to the individual than ordinary smallpox, but, like the mildest inoculated smallpox, capable of propagating that disease in its most virulent form by infection."

In whatever way we turn the practice of one condemns the practice of the other. Then take it in another aspect.

Of this one prescription alone it is the same dose for all ages and all strengths—"four scarifications and rub it in." The prescription is of the simplest; whether for a strong man of 30, for a child of 13, or for an infant of 3 months, or for the little atom of suffering humanity, workhouse born, before its seventh sunrise. I say such a thing is at once a sham and a shame. Then when the evil is done they come and look you straight in the face and say, "Well, we are very sorry, but it must run its course." This phrase, "It must run its course," has a solemn history in thousands and thousands of English homes; it calls up the difference that there is between the beautiful past and the future that once might have been, and that future as it is, marred with these hideous words written all across our dreams of it, "artificial induction of artificial disease, a disease that must run its course, though its course end only in the grave." I will show when I rise again how true, how fatally true, those words have been throughout the length and breadth of our land.

MR. BRANTHWAITE: I was quite prepared for the rambling statement which my friend has made in answer to my opening remarks. It is all very well to deal with loud declamation about certain things and forget altogether remarks which have been made prior to the address of the speaker in the negative. Now, I contended from the first that Jenner's remarks were with regard to the operation after the discovery was complete, and I had nothing to do with anything that Jenner said prior to the completion of the discovery. I said, I think, most distinctly that every other man was open to the same charge in the perfecting of any discovery. Jenner's point was always that the vaccination must be properly and efficiently performed. My friend may try to make a point out of the various qualities of lymph. I am very glad I excluded altogether this compulsory business, or else it is evident he would have posed before you to-night as a martyr, one of the finest things in the world to put to an English audience. You have only to stand before an English audience and say I am a martyr to anything, it does not matter what it is, the English heart is so full of sympathy and so full of feeling for a fellow-creature, that, whether he be right or wrong, they will vote in support of that for which he has suffered.

Now, my friend objects altogether to the sharp division of periods, and he pretends to quote from some authority. I quoted from the report of the Local Government Board, an extract from the Forty-third Annual Report of the Registrar General. My friend quoted from the Registrar General, so I

am fair in doing so, showing the mean annual death-rate from smallpox per million living (*a*) at all ages; (*b*) under 5 years. From 1847 to 1853 vaccination, optional at all ages, 365; under 5 years old, 1617. We do not exclude the epidemic years—certainly not. From 1854 to 1871, when vaccination was obligatory, but not efficiently performed, at all ages, 223; under 5 years old, 817. From 1872 to 1880, when vaccination was obligatory, and efficiently enforced by vaccination officers, at all ages, 156; under 5 years old, 323. Then from 1854 to 1880, the entire period of obligatory vaccination, there died at all ages, 198, and under 5 years old, 633, so that the deaths are reduced, under 5 years old, from 1617 to 633. If that is not co-incident with the progressive stages of vaccination I do not know what is.

Now my friend goes on and brings a charge against the doctors which I will simply pass over as being unworthy of the slightest notice. To attempt to deny statistics that are gathered from the practice of men, presumably gentlemen, is at all events unworthy of any debater on a public platform. It simply means that he charges this body of men with having told a huge lie and perpetuated that lie by bolstering it up by false statistics. Now, we will suppose for a moment that there is a reason in England—I will not say what reason there may be—for bolstering up statistics in order to support something—I do not mention what it is. Well then, just let us go to some countries where there is nothing of the kind existing to induce men to tell lies, and to stick to lies. In America—I quote from a speech of Sir Lyon Playfair—("Oh.") I will quote from Mr. P. A. Taylor directly; do not be in a hurry—the mortality of unvaccinated was even greater than in London during the epidemic, in Boston amongst the unvaccinated it was 50 per cent., in Philadelphia 64 per cent.* From January 1st to February 26, there were reported in the department of Brooklyn 112 cases, and of these 98 were found on examination to have the disease, and 14 not to have it. Of 100 who had smallpox 45 had never been vaccinated, and 27 of those died. 8 others had pale, imperfect and indistinct marks of vaccination, and were probably never vaccinated, using the term as it should be used; of those 4 died, so that we may say that 53 had never been vaccinated, of whom 31 or 58 per cent. died; of the 47 who had been successfully vaccinated, 6 or only 12 per cent. died. Now that is from a country where there is no reason for bolstering up statistics, or for telling any untruths about the

* Appendix, Note C.

matter. Statistics with regard to smallpox are objected to very often because the certificates of death do not state positively whether those who have died were vaccinated or not. Now Dr. Buchanan in his memorandum, made by order of the House of Commons, divides these, and shows that about one-third of the returns do not state whether vaccination had been performed or not, and in order to come to a proper division he divides that one-third betwixt the two, vaccinated and unvaccinated, and what is the result. It is argued that medical men are reticent because they fear the argument against vaccination. I do not fear the argument against vaccination. I have been vaccinating children for the last 35 years. I have held large public appointments as a public vaccinator. I have as a father vaccinated 12 of my children, and I stand here to-night and tell you that I have never in one single instance seen any injurious result from vaccination. Now the Registrar-General tells us that he only returns as vaccinated and unvaccinated such cases of smallpox as are so certified by regular medical practitioners. The Registrar-General only takes those that are marked vaccinated and unvaccinated. The result on the basis that I have named is at all ages, for the 52 weeks of 1880, the London death-rate from smallpox was 90 per million among vaccinated, and amongst unvaccinated at the rate of 3,350 per million. ("Oh.") I am quoting from the Registrar-General. If my friend can find a better man, perhaps you will save your "oh's" until he does it. Now, if the whole of the deaths, in which the fact as regards vaccination were not given, were amongst those who had been vaccinated the rate would be 90 per million amongst the vaccinated and 6,350 unvaccinated; on the other hand if we allow that the whole of the non-stated deaths took place amongst those who were unvaccinated then the death-rate of the vaccinated would be 247 per million against 3,350 of the unvaccinated.

Now, my friend refers to India and talks about sanitation. Now this is a stock argument with anti-vaccinators. They try to persuade us that the whole of the result of the reduced rate from smallpox is due to sanitation and increased sanitary measures. It would be idle to deny that improvement in sanitary matters has tended to lessen the death-rate from smallpox, but let us not forget that other causes have been at work having a tendency in an opposite direction. The population of the country has rapidly increased. The means of intercourse is very much greater and the movement of population more within the last century. All those circumstances tend to increase the danger of spreading infection, and it is a

matter of doubt whether the sanitary condition of the people has yet attained such perfection as to neutralise that effect. Moreover in the case of measles and whooping-cough there is not only no diminution, but a slight increase in the proportion of deaths from these diseases to the total diseases; and if sanitation has had no perceptible effect on these diseases, it is absurd to credit it with a large effect on smallpox, the contagion of which is stronger and surer than that of any other disease.* If you take the ratio in which deaths from zymotic diseases have decreased since the period of sanitation, since it has become anything like a science, you will find that the deaths from smallpox have decreased 80 per cent., but what reduction have we had in the deaths from zymotic diseases of another class? Why, very little over 6 per cent. Now, why on earth smallpox should by reason of sanitation decrease 80 per cent., and all other zymotic diseases only decrease something like 6 per cent., I fail to see, or why you should suppose that sanitation has done that for smallpox which it has not done for other diseases of a zymotic character.† Then you find as age advances beyond 15 years, mortality does decrease in other diseases probably from sanitation, but it increases as regards smallpox, showing how little influence sanitation has as a factor in governing the progress of smallpox. The cause of the increased mortality in smallpox at advanced ages is probably that there are still many unvaccinated, and amongst the vaccinated the protective power wears out as age advances.

Now, my friend talks about the evils which arise. He has only barely hinted at it, but I knew what he meant. He meant to imply what anti-vaccinators do, that vaccination produces other diseases. Very well; you see I am not disposed to blink any part of the subject, which seems to be considered of such vital importance. Now, in London in 1881, 12 deaths were registered as from cowpox, the disease occurring after vaccination. Inquiry into the facts of said deaths showed‡ that the cause of death was, with hardly an exception, erysipelas, derived from one or other source, and seldom even dating from the vaccination. Now, suppose all the 12 deaths had been justly attributed to vaccination, and had been the unavoidable result of vaccination. Then 12 lives lost by vaccination had paid for the gain of what? Of 12,000 lives that must have been sacrificed to smallpox but for vaccination. Since 1852 about 17 millions of infants had been vaccinated in England and Wales. If there were any

* Appendix, Note F. † Appendix, Note G. ‡ Appendix, Note H.

great truth in the allegation, not tens but hundreds of thousands of cases must have been observed, especially with regard to one particular disease, that of syphilis — “but it is extremely doubtful whether half-a-dozen central cases of propagation have been reasonably suspected.” That is from Sir Lyon Playfair again. Now, just one word upon that point as to what your friend, Mr. Taylor, did. Your friend, Mr. Taylor, was one of the Commissioners appointed by the House of Commons in 1871 to inquire as to whether there was any truth in the allegation that disease was propagated by vaccination.* “An active member of the Committee was the Hon. Member for Leicester (Mr. Taylor), who will bear me out when I say that we carefully heard the evidence of anti-vaccinators.” So they go on. Then Mr. Taylor, when the report was moved, voted to omit certain words, but after Mr. Taylor’s amendment, mind you the apostle, the Goliath of Gath of anti-vaccinators, agrees to this resolution — “That some few cases of disease have been communicated by vaccination, but the danger is so infinitesimal in respect to proportion, that, subject to the condition mentioned above, the Committee do not hesitate to express their conviction of the practically safe character of the operation.” That is Mr. Taylor himself. I wish I had time to take you a bit further, but I happen to have here an authentic copy of death-rates before and after the introduction of vaccination. I will first take you to the Rhine Provinces. As my friend has been to Cologne, I will go to the Rhine. In the Rhine Provinces the mean death-rate, prior to vaccination, was 908; subsequent to vaccination it was 90—908 against 90. We will go on to Eastern Prussia, and there the mean death-rate per million, prior to vaccination, was 3,321; the mean death-rate per million after vaccination, was 56. Go to Western Prussia, and you will find the mean death-rate before the introduction of vaccination, was 2,272, and after vaccination, it was 356. Surely if these figures mean anything, they mean that at all events it is a singular co-incidence that smallpox should be frightened at the appearance of vaccination, and gradually disappears for fear that the operation should be forced upon the people.†

MR. MILNES: First and foremost, I wish to protest, in the very strongest possible manner, against the so-called quotation which we have heard from Mr. Peter Taylor. I am somewhat lost in amazement as to what medical audacity will quote next

* Appendix, Note I.

† Appendix, Note K.

when medical men quote as an expression of Mr. Peter Taylor's present opinion, the report which he signed in 1871—a signature which, he says, in the introduction to his main work on the subject, he has bitterly repented of ever since; when he says that whatever power of work he has left, he will devote as a sacred duty to undo the fatal error that he then made. It is a very great pity that my friend's studies of Peter Taylor's writings have been strictly limited to second-hand extracts from Sir Lyon Playfair. Then we are told of the 12 deaths, and we are told to rejoice in that only 12 deaths have purchased for us 12,000 lives. Against that kind of thing, in the name of English law and our common humanity, I will protest. It is the morals of the Mignonette case, because it is laying it distinctly down that you may kill the weak and the defenceless and the few to save the many and the strong. English law has rightly made that murder; it has declared it murder in a poor sailor in the open sea, hard pressed by the actual presence of famine, in the excess of despair, and yet it is claimed as patriotism and science for the medical officers of the Local Government Board, pressed only by their dread of a disease that may never come, of a disease, too, that if they would but take a broom and a little clean water, they could keep out of their own places forever. As to the 12,000 lives of children said to be saved each year, I have only to reply that such a mortality amongst children alone would imply a mortality three times as great as existed in London before vaccination was invented.

Now, what were called my charges against the medical profession, formed a good deal of the back-bone of the remarks we have just listened to. My charges might be a tolerably serious responsibility for me, perhaps, if I made them. I do not make them—they make them for themselves. Of course, standing in the position in which I do, I must have most unbounded admiration for the evidence of Medical Officers of Health. Consequently, I will quote Mr. Henry May, the Medical Officer of Health for the Aston Union of Birmingham, who says—"In certificates given by us voluntarily, and to which the public have access, it is scarcely to be expected that a medical man will give opinions which may tell against, or reflect upon, himself, in any way. As instances of cases which may tell against a medical man himself, I will mention erysipelas from vaccination, and puerperal fever. A death from the first cause occurred not long ago in my practice, and although I had not vaccinated the child, yet in my desire to preserve vaccination from reproach, I omitted all mention of it from my certificate of death." When this is laid down in a

deliberate article on medical certificates; when we come to think what authority a Medical Officer of Health has in a district, how his practice is looked up to for guidance by the other medical men in the district, I mean to say that is a most dangerous doctrine; it contains a doctrine upon which I cannot found a stronger accusation than the words themselves convey.

And now, when we come to the consideration of these disasters, I would ask first, are they few; and secondly, are they slight? First, are they few? I have them tabulated here according to the increase in the stringency of the vaccination law. I will give you the returns of deaths per million born under one year of age from various diseases in the various periods. Whilst vaccination was voluntary from 1847-1853, of skin diseases there died of these little children 183 per million born per annum. Obligatory vaccination from 1853 to 1867 made it 253. Enforced vaccination 1867 to 1878 makes it 343—183, 253, 343 deaths from skin disease. Take scrofula, in the same periods you have 351 under voluntary vaccination, 611 under obligatory vaccination, and 908 under enforced vaccination. The worst of all human diseases—alluded to by Sir Thomas Watson as that ugly blot which has fallen on arm-to-arm vaccination, that ghastly risk, which enabled him to say that he can justify and even applaud the parent who, with the dread of it before him, resists the penalties of the vaccination law—with regard to that disease we have this return, 564 under voluntary vaccination, 1,206 under obligatory vaccination, 1,738 under enforced vaccination. We had it read to us how the medical officers of the Government have not seen such cases. But it is not convenient for the medical officers of the Government to see. For instance, Mr. Hutchinson gives his cases arranged in separate series; and his first series of cases, of which I have the record here, he gives as of 12 persons, mostly young adults, vaccinated from a healthy looking child. In all of these cases there could be no doubt whatever as to what was the matter with them. Now these cases Mr. Hutchinson states were brought under the notice of the medical officers of the Privy Council, and Dr. Seaton was requested to investigate them. Wherefore you see the value of the statement in Mr. Ernest Hart's "Truth about Vaccination"—that "no case of syphilis caused by vaccination has ever been discovered by the Medical Department." When Mr. Hutchinson clearly brings these cases before them they imitate Nelson, they put their blind eye to the telescope and declare that they cannot see.

But we come to the consideration of whether these disasters when they occur are slight. Here I would recommend the

consideration of the events that took place two years ago in Norwich, where Dr. Guy, a thrice rewarded public vaccinator—at least he was then a twice rewarded public vaccinator for the efficiency of his work—managed somehow or other to vaccinate to death in a single morning's work four children, and to injure five more. As the result of the investigation that was held Dr. Buchanan declared in a note appended to the Blue-book, that it must have been caused by some dirty appliances, used by Dr. Guy. Consequently of course you would imagine that Dr. Guy was dealt with and dismissed from his office. Here is a man who is said to use dirty appliances and with them does our little children to death—mind, that is according to Dr. Buchanan, because I do not myself believe it. I believe Dr. Guy was unjustly made the scapegoat for the evil due to the vaccination itself. But that is the official statement, at all events, that this medical man by his gross carelessness has done these little children to death. But Dr. Guy is public vaccinator of Norwich still, and has just been rewarded again, has drawn another reward from the public funds for the excellence of his work. The real monument to the excellence of his work is the graves in the Norwich churchyard, and it is in such graves as those that the real history of vaccination is being written all over the face of our country. They tell us these things are slight. Let me just give you, in the mother's own words, an account of a single one of these "accidents":—"I sent a message to Dr. Mason that my baby was ill. When Mrs. Hills came back she told me the doctor laughed, and said my baby would be all right if I took care of it. Baby, however, gradually got worse. Her left hand was swollen as big as an orange. . . . On Thursday fits came on and screaming. The fits continued, and she screamed so violently that she lost her voice. Her little lips moved, but there was no sound. On Saturday Dr. Mason saw her, and on Sunday, when it was evident she was dying. She died on Monday, November 5, twelve days after her first sickness, and three weeks after her vaccination." I believe I am fairly well read in our English literature, but I have not yet come across a passage that I could put for pathos by the side of that poor woman's simple story of the sufferings of that child. It appears to me that a more terrible account you could hardly read than of the poor little voice broken down with the excess of agony, and the silence of the grave setting in before death had come to release from suffering. This is the sort of thing that vaccination does for us when vaccination goes wrong; this is the kind of thing that these twelve deaths that we are told to make so light of

really mean. But are they only twelve deaths? In the last Registrar-General's returns you have for the last two years, of which the returns are given, 123 deaths of children from cow-pox and other effects of vaccination—123, that makes one a week, and it takes a child ten days of agony at least before death is merciful and sets it free—consequently, what do these figures literally mean with the bitter facts behind them? They mean, that as I am standing here to-night, whilst I am speaking to you, there is at least one English home where a mother is wrestling hand to hand with death for the little life for which she would so gladly give her own, and to-morrow's sun shall rise and tell her that in the struggle she has been defeated, in that fight is death the gainer; and that is the kind of thing that is always going on—always, according to their own account, in one or two English homes. But is it only one or two? In Norwich we found that there were four cases, and vaccination was mentioned on the death certificate of only one—that is four to one. In Gainsborough there were eight destroyed, and vaccination was mentioned on the death certificate of none. That makes it twelve to one. Multiply 123 by 12, and what would you get? That is the limit of the actual facts that we know to exist according to their own account. How much more we cannot tell. We can only gather it by supposition from these tables. These little children are practically always going from around us. These are the sacrifices that this medical dogma has exacted from us. Here, then, it is that we read the right history of vaccination. But although it is clear that it is here we find what vaccination has really done for us, though we find that its history is, as I say, to be read in the graves of little children all over the country, I do think those graves have voices, and are appealing at last to the people of England. The official ear, we know, is very deaf to the tears of the poor, but I do think those little voices are sounding in the ears of the English people at last. I am sure they are, for I travel all over the country on this question, and I know what the people think of it outside of London. I believe that the people on this question are waking up to ask the severest reckoning from those deceivers who ought to be their guides, to demand some reckoning from those who are ambassadors of a hideous Kilmainham treaty between the powers of cleanliness and the powers of dirt, to ask that reckoning from those who ought to be the apostles of a brighter gospel, who ought to be teaching to the people nature's beautiful and holy but stern law—"Be clean and live, for in matters sanitary the wages of sin is death." If all this money that has been spent—and observe, I say nothing against the money

spent: if vaccination were a good thing, the vaccinating doctor is a labourer worthy of his hire—but I say if all the money that has been spent on vaccination had but been spent in going Nature's way and in obeying her laws, in bringing in upon the people some conviction of the beauty of cleanliness, of pure air and pure water, then smallpox not alone, but the zymotic diseases as a class, would have been swept away from us before the advent into our courts, into our cellars, into our garrets, of Nature's one great panacea—heaven's holy light.

MR. BRANTHWAITE: Mr. Chairman, Ladies and Gentlemen,—I cannot but be amused at the way my friend has piled up the agony about the little children. He knows how to get at your hearts; it is a very good dodge, but, however, it is such a dodge that I do not intend to appeal to you in any such language. I intend to appeal to you purely, that the loss of these lives is a gain in the end. There is not the slightest doubt about it; he may multiply them by 12, and 12 more, it does not affect the fact or the argument at all in regard to the number that live that otherwise would not live. I am rather sorry he quoted Sir Thomas Watson again, because that was only the point in which Sir Thomas Watson alludes to a man placed in the position that my friend has been placed in himself, and, no doubt, he has the greatest sympathy for him on that account. You remember what I told you about Sir Thomas Watson. "It is right that this matter should be looked at in all its lights and all its shadows, in order that the inestimable blessing conferred upon mankind by Jenner shall be duly appreciated." My friend keeps hammering on about pure air and pure water, but he has failed to tell us how it is that since sanitation became a science smallpox has decreased 80 per cent., whilst other zymotic diseases have only decreased 6 per cent.; and I call upon him before this meeting to explain how that happens.* He has referred to skin diseases. It is said that certain skin diseases, such as erysipelas and eczema, are introduced by vaccination. Now, over and over again have I refused to vaccinate a child because I saw a tendency to some eruption, and I have said to the mother, I object to vaccinate that child this morning; just wait a week or two. She has said, Why? I said, I see some indication of an eruption coming out on the child. If I vaccinate it and the eruption comes out in three days, you will blame vaccination. I have proved the wisdom of being very careful to see whether there be any indication of any eruption

* Appendix, Note G.

likely to appear on the child, and if I saw it, I never did vaccinate. My friend, I dare say, will agree with me that, with regard to many of these cases, the argument is *post hoc* and not *propter hoc*. Now, if these children have died, it is a very sad thing. I should like to pile on the agony a bit, but I cannot. It is a very sad thing, especially if it is your child or mine who is seized. But occasionally people die under the influence of chloroform. Are you going to give up the use of anæsthetics because people have died under the influence of chloroform? Am I to refuse to remove a piece of dead bone from a man's arm because every now and then after an operation of that kind we get erysipelas, eczema, and skin irritation of all kinds? The argument is an absurd one. To condemn one because an occasional attack of erysipelas, or some other skin irritation, should follow. Another thing is this, that you are not prepared to assert to me that the development of any one of these things is due to vaccination. There may be a latent mischief in a child that the vaccination lights up and develops—a something that would have developed in the ordinary course of time either in that form or some other form. Therefore, you are not prepared to say that in all these cases it is the result of the vaccination alone. I have all along protested, and in this debate I protested, as clearly as I could, in my paper against the careless performance of the operation. That is attended with danger. My friend need not have wasted time in talking about the carelessness of the operation. The carelessness of the operation does not affect the operation itself, and I am fully and freely prepared to admit that carelessness has occurred in the performance of vaccination; and I believe it has been mainly owing to my own great care that I can say to-night on this platform, that for the past 35 or 37 years I have never seen a case where injury has resulted to any child that I have vaccinated. Now my friend says people are waking up; they are very slow in waking up. In 1872 there were 8·8 per cent. of children unaccounted for, and in 1881 there were 3·5 unaccounted for. I fancy they are going to sleep, not waking up, and allowing matters to take their course. He quoted to us a medical officer of health; well, you all remember what Carlyle said, that "England contains a population of 30 millions, mostly fools," and if two or three of those fools get into the medical profession, it is not to be wondered at.

MR. MILNES: Our friend did not tell us whether Mr. Henry May was a fool for what he wrote, or for letting the cat out of the bag, as to how the oracle is worked to make vaccination

appear harmless by cookery of death certificates. I am inclined to think myself that in the view of the medical profession it was the latter. We are asked about other zymotic diseases. Where is the plague now? What about the cholera now? Was it vaccination that stamped out the cholera? is it vaccination that has made the plague a thing of the past? What has become of the black death now? What has become of gaol fever now—the gaol fever which in the time of the Stuarts gave a terrible significance to the phrase, “rot in gaol”? Why, sir, without vaccination we have got rid of all those diseases; they are history, and history only. But with vaccination we have not got rid of smallpox; so far from becoming mere matter of history, as other zymotics have, smallpox remains a present fact; and the comparison between it and other zymotics is all against vaccination. Then my friend said he wished he could pile up a little agony. We do not want his agony—we want our birthright back again. I can assure him that as far as those people who are professional advocates of vaccination go, I never ask for any of their pity. When I do I think I shall deserve their contempt; and, seeing that amongst them there are men like Henry May, lower than that I do not think my worst foe could wish that I should fall.

Then we are asked about chloroform and surgical operations. The difference is this, that the chloroform is administered to the sick; the surgical operation is performed on a man, not who is in health, but who is ill. The surgical operation is to relieve present suffering; but vaccination is performed upon the healthy child who may never have anything the matter with it whatever. Vaccination only lights up the disease, they say. Speaking for my children, I should rather that the disease should remain unlighted. And, moreover, we are told that it is only due to the carelessness of the operator when any harm follows. Can my friend give me—I wish I had the chance of challenging him to give me—one case? Yes, there has been one in Germany—two cases—of a medical man who has even been tried for this criminal carelessness in vaccination? Has a medical man ever been brought to justice for it? When you get them into court, when the child is there with the arm burst open, and the fingers rotting off, they can always lay on medical evidence from the Local Government Board; they can always pull vaccination out of the scrape, and a medical man has never yet been prosecuted and punished for the carelessness which, we are told, is the only origin of the misfortune. Then we are told about the small number of the children that are unaccounted for. The Local Government Board are always three years behind with their statistics, and the Local

Government Board takes very good care to put the best face upon the matter of vaccination returns. At the very time when the Medical Officer of Health in Keighley was in utter despair because there were only 9 per cent. of the births in that town vaccinated, the Local Government Board were reporting that 24 per cent. were vaccinated. There you have the two together, the medical officer asking the guardians what can he do, he can only get 9 per cent. vaccinated, while in London they were declaring it was not 9, but 24 per cent., because I suppose they had been there to see, and knew better than the man in the place. Then I have here the last report of the Highgate Smallpox Hospital, that for the year ending December, 1884. That tries to make out of course the usual case in favour of vaccination, but there is this to be noted about it; of the 27 unvaccinated cases there are said to have been 22 confluent unmodified, 1 confluent modified, 3 semi-confluent, and 1 hæmorrhagic, thus making up the whole 27. Now I need not stay to point out that of these cases one had been inoculated, and another had had smallpox previously as well as having been "unsuccessfully vaccinated." But I do want to draw special attention to the fact that whilst on the one hand we have thousands of recorded cases of the mildest smallpox in times before Jenner was born, before vaccination was heard of, yet we are now on the other hand asked to believe that every single unvaccinated case is of the severest type, that a mild case amongst the unvaccinated is not to be had for love or money. I have only to reply that such a statement is incredible on the face of it; I should have to take leave of my senses before I could be persuaded to believe it. Again, we have here in all 474 cases of which 447, or 94·3 per cent. are admittedly vaccinated, and this at a time when not more than 90 per cent. of the population are even claimed as vaccinated, thus by their own account leaving vaccination some 4 per cent. to the bad. And then again I want to show what kind of work is done by these medical statisticians whose decisions we are told that we must accept with unquestioning faith. Here at the top of page 9 of this report we are told that the deaths amongst the vaccinated numbered 43, and down below on the same page we have them tabulated thus:—confluent unmodified 27, confluent modified 5, that makes 32; hæmorrhagic 18, that makes 50; corymbose 2, that makes 52;—not 43 but 52. Here is a specimen of medical statistics! Men who cannot add up four small entries and get the answer anywhere near right, yet belong to a profession which claims that its statistical work is beyond the sacrilegious criticism of outsiders like myself. And again, taking all the cases, vaccinated

and unvaccinated together, we have an overhead mortality of nearly 15 per cent. of cases, only 3 per cent. lower than the pre-vaccination death-rate;—just about the amount of change that we might fairly expect from improved medical treatment. So that when we come to work it out into percentages, then in every possible direction we find vaccination has failed. Its failure is written on the faces of the people. We hear a great deal about the vanishing of smallpox-marked faces; but the *Lancet* only a little while ago—the *Lancet*, whose name is a monument to a medical blunder, the blunder of constant bleeding, which they erected into a theology, and which as a theology has claimed its hecatombs of human sacrifice; yet they tell us that we have no right to criticise their opinions—even in the very *Lancet* we had a little while ago a jeremiad about the increasing constancy and frequency with which we see persons marked with the smallpox in the streets. The last thing I have to say is this: I was accused of a dodge in speaking of the sorrows of the people. I very much wish that my friend would come with me as I go about all over the country, and go into the houses of the people and see and hear what they really think. Poor men write to me to come to speak for them, and, as I never go anywhere except at my own expense, I often am hard pressed indeed to know how to refuse these invitations. They write to me from all parts of the country, Come down and help to plead for us. One man, a little while ago, wrote to me, We are only poor working people, but our homes and all we have are at your service if you only like to come. The feeling is growing with immense strength amongst the people. And as to these returns of children unaccounted for, I strongly suspect that for many places they are false. My time draws to a close, but I submit my task is done, and I claim that to-night I have met all that I could possibly gather of the arguments of my opponent. I have met them without evasion, I have met them as he gave them, and I submit that they have been overthrown. I claim, then, that I am standing here amongst the ruins of slain arguments. It is no particular credit to me to have slain them; they have been slain times without number, upon platforms numberless, before. But slain they are; and, therefore, it is that—if I might adopt some more words of Lord Macaulay, and adapt them very freely to the present occasion—I would take leave of the subject something like this:—

“ Then see, I say, the welcome,
 Fair guests, that waits you here;
 What Officer of Health comes next
 To taste our Roman cheer? ”

THE CHAIRMAN: Ladies and Gentlemen,—Whatever answer you give to the question I am about to put to you, I am sure we shall all be of one opinion, that we have had the respective points ably laid before the meeting, and that we have had altogether a very interesting debate. The question upon which I shall ask you to vote is as follows:—"Is vaccination desirable from the standpoint of the public health?"

The question was then put to the vote, and the Chairman declared the negative to be carried by 43 to 30.

Mr. BRANTHWAITE: Ladies and Gentlemen,—I do not to-night say, Save me from my friends; but as the vanquished, it becomes my duty to propose to you that the best thanks of this meeting be presented to Mr. Munton for the very able manner in which he has kindly presided to-night. I need not tell you few who are the natives of Willesden, that there are a great many who are not natives of Willesden, who have come here for a purpose, and that purpose they have carried. It is only fair that fact should be publicly made known; but it has nothing at all to do with the motion that I now propose, that the best thanks of this meeting be presented to Mr. Munton.

Mr. MILNES: Not at all wishing to claim the honours of any victory—because I came here not for victory, I came here for the truth—I beg leave to second the motion, and to express my hope also, that when the fact about people coming here from a distance is made public, it will likewise be made public that there are many men who are willing to travel all across London to support their views on this question, and to vote against vaccination, whilst the inhabitants of Willesden will not walk half a mile to hold up a hand in its favour.

Mr. Milnes then put the resolution to the meeting, which was carried by acclamation.

The CHAIRMAN: Ladies and Gentlemen,—I am sure I am very much obliged to you for the cordial manner in which you have carried the resolution which has been put to you. During the last few moments some allusions have been made to matters which are not strictly part of the meeting, but I think we shall all say that, taking it all in all, the debate has been conducted with as much good humour as the trying circumstances of a debate like this will admit.

APPENDIX.

Sundry points upon which, since the debate reported in the preceding pages, inquiries have been made of Mr. Milnes, are here dealt with in the form of short notes.

NOTE A, p. 4.—“ *Two out of every three persons applying for relief at the Liverpool Hospital for the Blind owed their loss of sight to smallpox.*” We are under no concern to prove that smallpox does not cause blindness. Our contention is limited to the proof that vaccination does not prevent smallpox. Still we must protest against exaggeration, or call for evidence to support hearsay. It is intended that we should believe that at this day two out of three are blind by reason of smallpox. If so, then we must conclude that in these days of almost universal vaccination smallpox causes more blindness than it did seventy years ago; for in a letter issued from the National Vaccine Establishment on Feb. 14, 1811, the Directors say:—“ We wish to call attention to the fact ascertained by the Society for Teaching the Indigent Blind, namely, that *nearly one-fourth* of the persons admitted to that charity have been deprived of their sight in consequence of smallpox.” Thus the proportion which was nearly 25 per cent. in 1811 has risen to 66 per cent. in 1871.

Moreover there is a debtor side to the account. Dr. Campbell, of the Normal School for the Blind, Norwood, states that he has had many children under his care whose blindness was due to vaccination.

NOTE B, p. 4.—“ *All was done towards lessening of the evil.*” It would be truer to say all was done for aggravation of the evil. Dr. John Clarke, in his Commentaries on the Diseases of Children, published in 1815, says:—“ Restrictions under the heaviest penalties ought to be enforced upon the licentiousness of inoculation for the smallpox, by which the existence of the disease has been insured to such a degree, that it is scarcely to be doubted that more persons have died of the smallpox since the introduction of inoculation than before it was known in England, because the infection has been perpetually kept up, and disseminated by this means at all times; whereas before inoculation was known, it was only occasionally endemic.”

NOTE C, p. 5.—“ *The deaths from natural smallpox were as one in six,*” says Mr. Branthwaite, speaking of a time when all were unvaccinated. Now one in six is 16·6 per cent. Yet on p. 9 he makes the unvaccinated death-rate to be 40 per cent.; and on p. 18 he raises it to 50 per cent. for Boston and 64 per cent. for Philadelphia.

NOTE D, p. 10.—Mr. Branthwaite compares the immunity of nurses in smallpox hospitals with their non-immunity from typhus. The comparison is unfair. Smallpox and typhus are not comparable. Smallpox is predominantly an affection of the young: typhus is predominantly a fever of adults. Wherefore nurses as adults or middle-aged women have their risk of smallpox prodigiously reduced by reason of their years. A truer comparison would run with nurses in contact with scarlatina, whooping-cough, and measles—diseases which nurses very rarely contract.

NOTE E, p. 10.—“*The French army where vaccination was neglected.*” It was not neglected. “Every recruit, on joining the French army, is vaccinated or re-vaccinated. Our army knows no exception.”—Dr. Bayard.

NOTE F, p. 21.—“Smallpox, the contagion of which is stronger and surer than that of any other disease.”

“I look upon scarlet fever as the most infectious disease that there is.”—Marson’s *Evidence before the 1871 Committee*.

“Typhus is at once the most contagious and the most easily preventible of diseases.”—Dr. Norman Kerr, in *British Medical Journal*, Nov. 12, 1881.

Who shall decide when doctors disagree?

NOTE G, p. 21.—This argument, frequently repeated, is answered twice in the course of the debate. See the extract from the Registrar-General, p. 16; and the commencement of Mr. Milnes’s last speech. But, as the point is so often urged, the following passage may form a valuable commentary on it* :—

To compare smallpox with all diseases other than smallpox is to compare things totally incomparable. Let a comparison be instituted between smallpox and that great class of diseases closely allied to it, and grouped together under the name of fever, viz., typhus, typhoid, and simple continued fever, and let Sir Lyon Playfair’s own periods be taken (with the exception of the years 1847-49, for which the Registrar-General does not give the figures for fever), and see what is the result:—

				Deaths per Million Living.	
				Smallpox.	Fever.
1850-53,	...	...	...	310	986
1854-71,	...	...	...	223	940
1871-80,	...	...	...	156	473

Now, if the ratio of the first to the last period of smallpox death-rate be compared with that of the fever death-rate, it will be found that the latter shows a decline 2 per cent. greater than the former; and the difference left to be accounted for by vaccination, therefore, on this reckoning, becomes a minus quantity. Curiously enough this same concomitant decline of fever and smallpox was noted by Dr.

* From Dr. Collins, “Sir Lyon Playfair’s Logic.”

Farr as having occurred at the beginning of the century at a time when smallpox was said to be flying before the advent of vaccination. Dr. Farr says:—"Fever has progressively declined since 1771; fever has declined in nearly the same proportion as smallpox," and the figures he gives are these:—

			Deaths per 10,000 Living.		
			1771-80	1801-10	1831-35
Fever, ...	...	...	621	264	111
Smallpox, ...	...	...	502	204	83

NOTE H, p. 21.—"*Inquiry into the facts of the said deaths showed.*" There never was an inquiry.

NOTE I, p. 22.—"*Commissioners appointed by the House of Commons in 1871 to inquire whether there was any truth in the allegation that disease was propagated by vaccination.*" It was not a Commission but a Committee. They were appointed for no such purpose, but to consider whether the law required amendment, and they reported against repeated penalties.

NOTE K, p. 22.—"If these figures mean anything," etc. No authority for these figures was given. But waiving that objection, then, if they mean anything they mean the same as every other comparison (which does not expressly omit the 18th century), between the pre- and the post-vaccination death-rates. Before vaccination the doctors were spreading smallpox broadcast through the land by inoculation. When vaccination supplanted inoculation, the doctors left off spreading smallpox broadcast through the land; and, so far as the doctors are concerned, there the story ends.

ANTI-VACCINATION LITERATURE

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"Compulsory Vaccination in England" is an admirable little book. The sections on Vaccination in the Army and Navy are themselves absolutely conclusive as to the uselessness of vaccination, and its hurtfulness.—A. RUSSEL WALLACE, LL.D.

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Singular, in the case of human swarms, with what perfection of unanimity and quasi-religious conviction the stupidest absurdities can be received as axioms of Euclid, nay as articles of faith, which you are not only to believe, unless malignantly insane, but are (if you have any honour or morality) to push into practice, and without delay see done if your soul would live!— THOMAS CARLYLE.

Mr. White is certainly an ugly customer for the doctors to meet. He does not trouble himself much about rhetoric, but *his facts are such that we really do not think he can be answered*. If he merely screamed, as some of the agitators scream, we should not pay attention to him; but he is a grave and solid controversialist who reasons like a mathematician. Our own opinion is that each parent should be left to decide for himself whether or no he will submit his children to inoculation. The process may be a useful one as a rule; but surely if a man finds that a fine child has been smitten with erysipelas, or scrofula, or diseased glands, or with a more hideous disease still, and if he traces the affliction to foul lymph, it is monstrous to make him risk the health and happiness of the rest of the family. *The whole system must, and will, be revised.*—*Vanity Fair*, Jan. 31.

We may fairly call this sturdy volume the anti-vaccinator's bible. It is a determined and well-informed impeachment of the vaccination theory, bristling with facts, and enlivened by the most biting sarcasm. The author has searched all nooks and crannies of the subject, analysed the figures and arguments of the upholders of vaccination, and his conclusion is, that "Vaccination is a medical monopoly, established, endowed, and enforced—a tyranny to be overthrown."—*Chester Chronicle*, April 25.

Although this is only a matter of fact history of vaccination by a noted anti-vaccinationist, the work has been done with such consummate skill, both as to compilation and literary ability, that the book will stand comparison with the most interesting of novels.—*Greenock Telegraph*, May 9.

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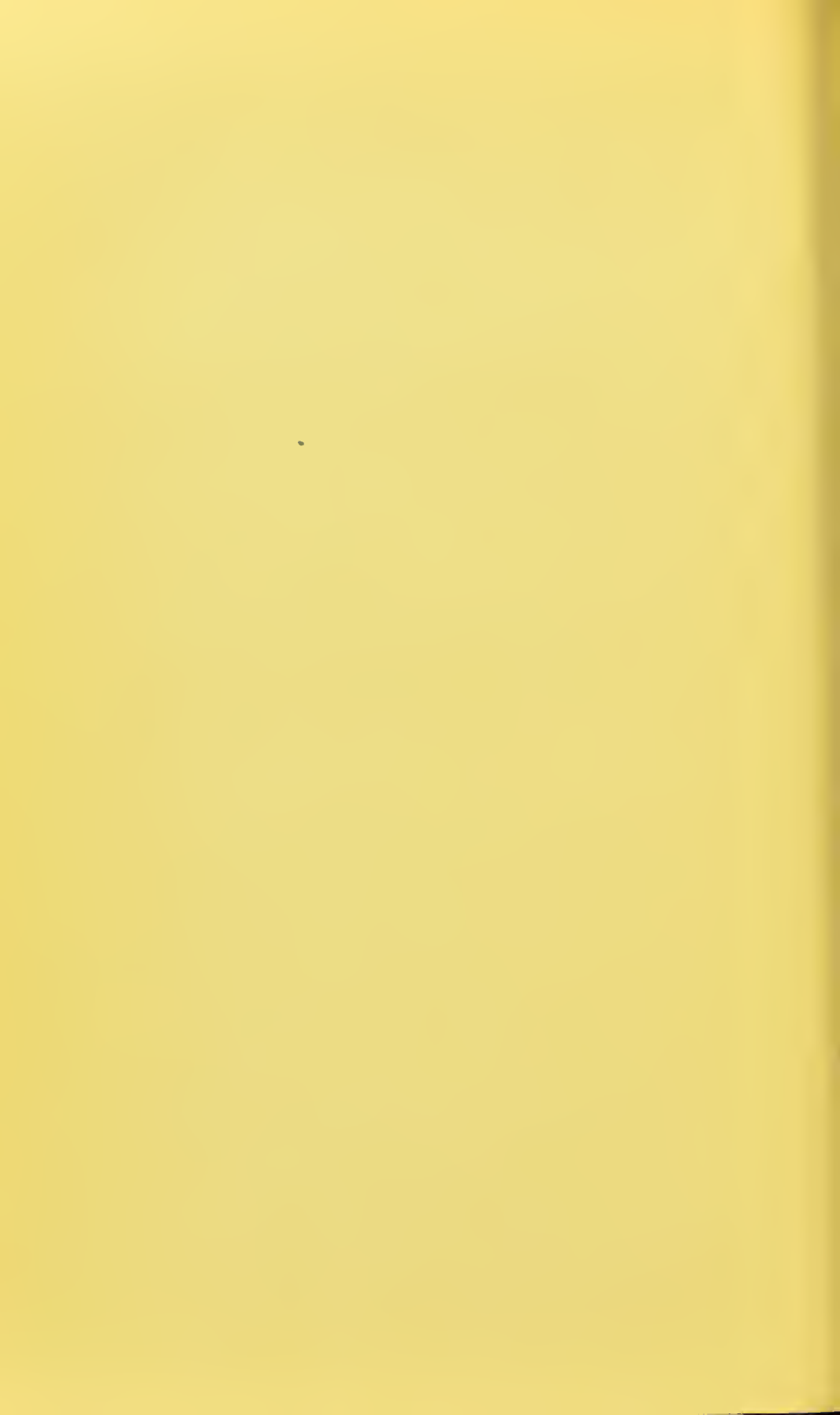
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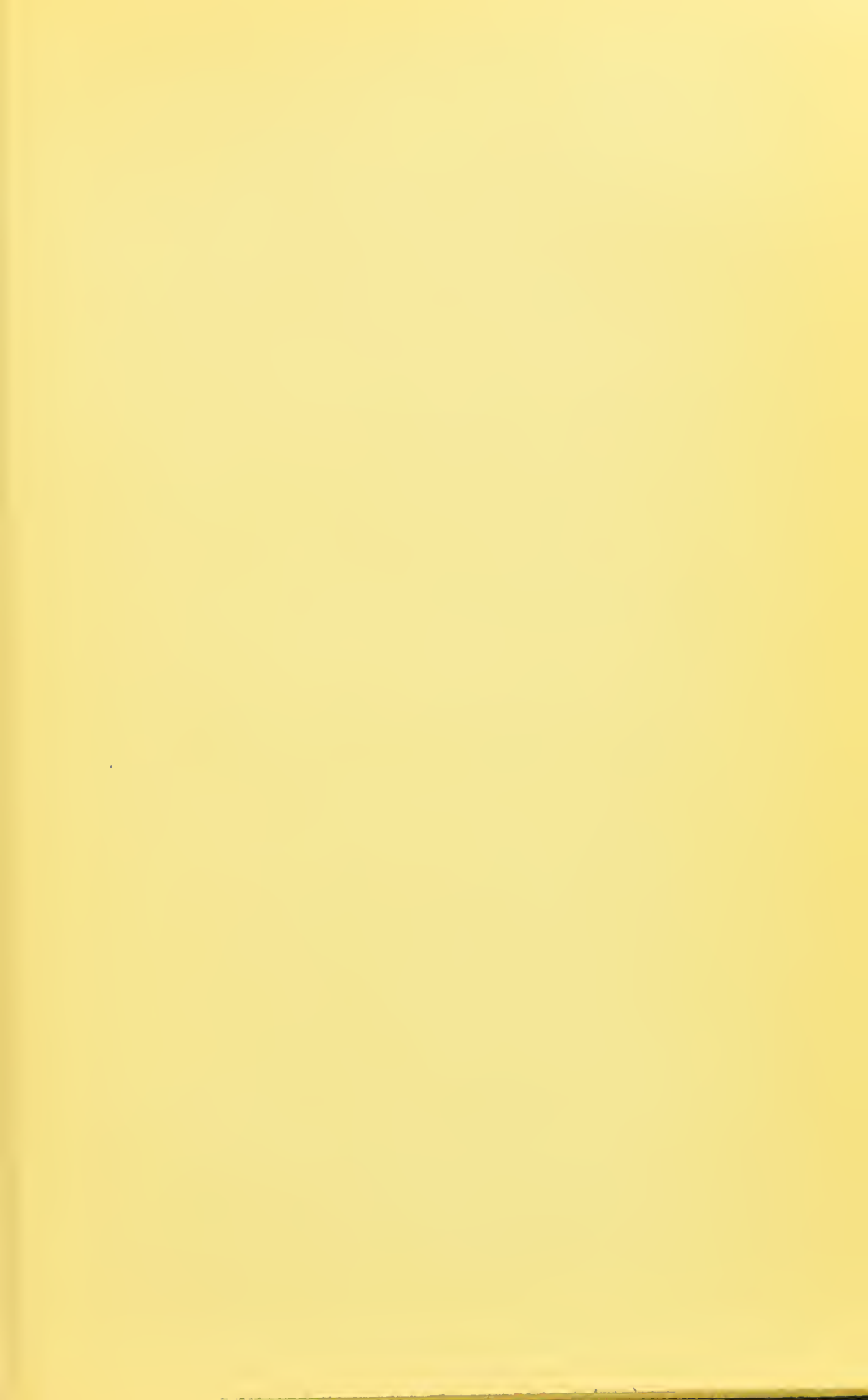
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